

COUNTY OF LOS ANGELES DEPARTMENT OF HUMAN RESOURCES

HEADQUARTERS
579 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012
(213) 974-2406 FAX (213) 621-0387

BRANCH OFFICE

3333 WILSHIRE BOULEVARD • LOS ANGELES, CALIFORNIA 90010

(213) 738-2222 FAX (213) 637-0820

May 12, 2009

To:

Department Heads

From:

Sandrá Wallace Blaydow

Senior/Human Resources Manager

Subject:

LA COUNTY STARS! - JULY 2009

(SPECIAL TALENTS FOR ACHIEVING REMARKABLE SERVICE)

LA COUNTY STARS! serves to recognize employee performance reflective of the County mission statement and values. Under LA COUNTY STARS!, management and non-management employees, individuals, and teams may be recognized. Board Chiefs of Staff, Deputy Chief Executive Officers, Department Heads, and Chief Deputies are not eligible to be nominated.

Consistent with the County mission statement and values, departments may submit <u>only one</u> nomination (individual or team) per month. These nominations should reflect the positive image of County employees and provide an excellent opportunity for enhancing staff morale. Please note that the number of awards given each month will depend upon the number of nominees who meet the threshold criteria based upon the points awarded for each entry (18 out of 20 points required for consideration).

Your department's nomination is requested by June 2, 2009. <u>Please submit the appropriate three-page nomination form</u> for your nominee/team from one of the following three strategies from Goal 1: Operational Effectiveness (attached is the new Strategic Plan Goal adopted by the Board of Supervisors last month):

- Strategy 1: Fiscal Sustainability
- · Strategy 2: Service Excellence and Organizational Effectiveness
- Strategy 4: Workforce Excellence

For the month of July 2009, the **LA COUNTY STARS!** Strategic category award ceremonies will take place as follows:

July 7

Service Excellence and Organizational Effectiveness

July 7

Workforce Excellence

July 21

Fiscal Sustainability

Department Heads May 12, 2009 Page 2

Your nomination for <u>only one</u> of the above categories should be sent to Ann Gomez, Program Coordinator, at 3333 Wilshire Boulevard, Suite 1000, Los Angeles, CA 90010. These forms are available via an e-mail request to <u>lacountystars@hr.lacounty.gov</u> or you may download them from the LA COUNTY STARS! Web site, http://stars.lacounty.gov. The Department of Human Resources (DHR) will become the sole proprietor of all nominations; consequently, we are unable to provide or produce copies for departmental use. The nomination forms, along with the selection criteria and suggestions for documentation and two sample nominations, are attached for your use.

Please note that the total score for your department's entry will be based upon the points assigned to the required nomination form criteria and the shared values checklist. Following the selection and notification of **LA COUNTY STARS!**, the Board of Supervisors will recognize the individual(s)/team(s) on the Board meeting dates as noted above. If you have any questions, please call me at (213) 351-8945 or Ann Gomez of my staff at (213) 738-2175.

Thank you.

LMG:SWB:lh

Attachments

c: Deputy Chief Executive Officers
 Chief Deputies
 Administrative Deputies



Employee/Team Nomination (Monthly) LA COUNTY STARS! (Special Talents for Achieving Remarkable Service) Workforce Excellence

Employee/Team Nam	e (use space provide	ed below to enter	Team Members' ir	nformation):		
Payroll Title			Years in County Service:			
Department Name			Division of Dep	partment	A CONTRACTOR	
Work Address (for tea	ms, please attach a	separate sheet):				
Nork Telephone Num	ber:		Work E-mail A	ddress		
Please provide the name of a staff person who may be contacted if DHR staff have questions about the details of this nomination:			Name: Phone Number:			
		mitted by the fo	llowing departm	ental administrato	rs:	
Signature of Nominat	for:		Date:			
Vame, Title, Mailing Address of Nominator: Department Head's Signature:			Phone Number: Fax Number: Date:			
Name	Title	Department /Division		Telephone	E-mail	
*						
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Employe	e /Team Name(s):	
	ee Excellence: Enhancing the quality and productivity of the County workforce. Describe how the nominee implemented human capital management best practices (e.g., succession planning, professional development, employee surveys).	Internal Use Only
2.	Describe how the nominee enhanced the recruitment, development, and retention and well-being of qualified County employees.	
3.	Describe or list any training or skill development used by the nominee in creating program(s) to enhance the quality and productivity of the County workforce.	
		Initial

by well did the nominee reflect the County of Los Angeles' Shared Values in accomplishing their results? Please portant to provide specific examples of shared values as they are a critical component of the rating. A numerical signed to each shared value and will be carefully considered in compiling the candidate's overall score. ccountability – accepts responsibility for the decisions made and the actions taken.	
Can-Do Attitude – approaches each challenge believing that, together, a solution can be achieved.	
ompassion – treats those we serve and each other in a kind and caring manner.	
ustomer Orientation – places the highest priority on meeting our customers' needs with accessible, sponsive quality services, and treating them with respect and dignity.	
tegrity – acts consistent with our values and the highest ethical standards.	
adership – engages, motivates and inspires others to collaboratively achieve common goals through ample, vision and commitment.	
ofessionalism – performs to a high standard of excellence, and takes pride in our employees and ests in their job satisfaction and development.	
spect for Diversity – values the uniqueness of every individual and their perspective.	
sponsiveness – takes the action needed in a timely manner.	
ONUS: Describe how the nominee employed collaboration in their achieving results.	initial

Dept No.



Employee/Team Nomination (Monthly) LA COUNTY STARS! (Special Talents for Achieving Remarkable Service) Fiscal Sustainability

Employee/Team Nam	e (use space provid	ed below to enter	Team Members' i	nformation):		
Payroll Title			Years in County Service:			
epartment Name			Division of Dep	partment		
Nork Address (for tea	ams, please attach a	separate sheet):				
Vork Telephone Number:			Work E-mail Address:			
Please provide the name of a staff person who may be ontacted if DHR staff have questions about the letails of this nomination:			Name: Phone Number:			
This	nomination is sub	mitted by the fol	lowing departm	ental administrato	rs:	
Signature of Nominat	tor:		Date:			
lame, Title, Mailing Address of Nominator:			Phone Number: Fax Number:			
Department Head's S	ignature:		Date:			
	10.	Team Member(s) Information			
Name	Title	Department /Division		Telephone	E-mail	
				_		
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iscal Sus	stainability: Strengthening the County fiscal capacity.	
1.	Describe how the nominee promoted sound, prudent, and transparent short-and long-range fiscal policies and practices.	Internal Use Onl
2.	Describe how the nominee helped ensure maintenance of critical, high priority County public services despite cyclical economic conditions.	
3.	Describe how the nominee implemented performance-based management and decision-making skills based on <i>Performance Counts!</i> data.	

Initial

Dept No.

ow well did the nominee reflect the County of Los Angeles' Shared Values in accomplishing their results? Please apportant to provide specific examples of shared values as they are a critical component of the rating. A numerical assigned to each shared value and will be carefully considered in compiling the candidate's overall score.	score will be
ccountability – accepts responsibility for the decisions made and the actions taken.	Internal Use Only
Can-Do Attitude – approaches each challenge believing that, together, a solution can be achieved.	
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	Initial
	Dept No.



Employee/Team Nomination (Monthly) LA COUNTY STARS! (Special Talents for Achieving Remarkable Service) Service Excellence and Organizational Effectiveness

mployee/Team Nam	ie (use space provid	led below to enter	Team Members' i	nformation):		
Payroll Title			Years in County Service:			
epartment Name			Division of Dep	partment		
Vork Address (for tea	ams, please attach a	separate sheet):	L			
Vork Telephone Nun	nber:		Work E-mail A	ddress		
Please provide the name of a staff person who may be ontacted if DHR staff have questions about the letails of this nomination:						
This	nomination is sul	bmitted by the fo			ors:	
ignature of Nomina	tor:		Date:			
lame, Title, Mailing Address of Nominator:			Phone Number: Fax Number:			
epartment Head's S	ignature:		Date:			
		Team Member(s) Information			
Name	Title	Department /Division		Telephone	E-mail	
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	737					
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	ce Excellence and Organizational Effectiveness: Providing the public with easy access to quality ervices that are both beneficial and responsive.	information
¥	Describe how the nominee improved the quality or delivery of a service product and demonstrated the ability to analyze, assess and improve the effectiveness of the organization.	Internal Use Only
		4 -1-4-1
10 	Describe how the nominee responded to customer requirements in an exemplary, timely, and courteous manner to streamline and improve administrative operations and processes to make the	
	organization more efficient.	
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	Describe how the nominee streamlined and improved administrative operations and processes to increase effectiveness, enhance customer service, and support responsiveness to County operations. Describe how the nominee evaluated the organizational structure to achieve operational efficiencies and improve County service delivery, including restructuring or consolidating existing County departments, functions, or commissions, and partnerships with external agencies.	
		Initial Dept No.
		Dept No.

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